

VILLAGE OF BRIDGEVIEW

7500 S. Oketo Ave • Bridgeview, IL 60455 • Phone 708-594-2525 Village President Steven M. Landek

Village Trustees Norma J. Pinion • James A. Cecott • Patricia A. Higginson • Mary J. Sutton • Michael J. Pticek • Claudette Struzik

Village Clerk John C. Altar

April 1, 2013

Dear Applicant:

Thank you for your interest in the position of Police Officer for the Village of Bridgeview. Enclosed you will find an application packet containing: i) Application form; ii) Authorization to Release Information and Waiver form; and iii) a copy of the advertisement for this position.

In order for your application to be considered by the Village of Bridgeview Personnel Board, you must strictly adhere to the following:

- Complete and sign the Application form;
- Complete and sign the Authorization to Release Information and Waiver form.
- 3. Provide copies of the following documents:
 - a. Birth Certificate or other proof of legal authorization to work in the United States;
 - b. Social Security card;
 - c. Valid Driver's License;
 - d. College transcript showing a minimum of 60 credit hours from an accredited college or university; or a copy of High School Diploma along with DD214 showing two (2) years of active military service not terminating in a dishonorable discharge; or proof of at least four (4) years of service as a certified part-time police officer; and
 - A current Peace Officer Wellness Evaluation Report (P.O.W.E.R.) Test Identification Card, as administered by Northeastern Illinois Public Safety Training Academy (NIPSTA) showing a satisfactory completion date of no earlier than May 1, 2012.
- 4. Provide two (2) current passport-style photographs; and
- Pay a \$35 non-refundable processing fee.

Place items 1 through 5 (above) in a sealed envelope and return it by hand no later than 5:00 p.m. on April 26, 2013. Please return to:

Village of Bridgeview Personnel Board Attn: Cathy Siciliano 7500 S. Oketo Ave. Bridgeview, IL 60455





TOYOTA PARK

FUN within reach

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Payment of the \$35 non-refundable processing fee will be due at the time the application is submitted. Make checks payable to "Village of Bridgeview" and designate it as "processing fee" in the memo line. An application will be deemed incomplete if any requested items are omitted or any of the forms are not fully completed. **INCOMPLETE OR LATE APPLICATIONS WILL NOT BE PROCESSED**.

You may submit questions regarding the application packet by email to the undersigned at: glewis@villageofbridgeview.com. Questions by phone will not be answered. Questions regarding the hiring process will be answered at the mandatory orientation session.

Shortly after the application deadline, all eligible applicants will receive a testing schedule and an invitation to attend the mandatory orientation session. Thank you again for your desire to join us and good luck.

Sincerely,

Gary Lewis, President Bridgeview Personnel Board





Police Officer Bridgeview, Illinois

Village of Bridgeview

7500 S. Oketo Ave. Bridgeview, IL 60455 Phone: (708) 594-2525

Website: http://www.bridgeview-il.gov/

Population: 16,446

Salary Range: \$48,004-\$76,658

Sworn Officers: 36

Application Deadline: 04/26/2013

POSITION OF POLICE OFFICER

VILLAGE OF BRIDGEVIEW

The Village of Bridgeview Personnel Board is now accepting applications for the position of Police Officer.

SALARY AND BENEFITS

Salary Range: \$48,004 - \$76,658 (\$57,333 after the first year)

Benefits: health and dental insurance, life insurance, pension plan, sick days and vacations.

REQUIREMENTS

Applicants must:

- Be a citizen of the United States or legally authorized to work in the United States.
- Be at least twenty three and one-half (23.5) years of age and under thirty-five (35) years of age (unless otherwise permitted by statute).
- Have 20/20 vision in both eyes or correctable to 20/20 with corrective lenses in both eyes.
- Have completed sixty (60) semester hours from an accredited college or university with
 at least a cumulative grade point average of 2.0 on a 4.0 scale; or a High School
 Diploma (or equivalent) with two (2) years of active military service not terminating in
 dishonorable discharge; or four (4) years of service as a certified part-time police officer.
 The Board has the sole discretion to determine whether an applicant's service as a parttime police officer satisfies the requirements of appointment.
- Possess a valid driver's license.
- Possess a valid Northern Illinois Public Safety Training Academy (NIPSTA) Police
 Officer Wellness Evaluation Report (P.O.W.E.R.) Test Identification Card showing a
 satisfactory completion date of no earlier than May 1, 2012.
- Complete and timely submit the application and all supporting documents.
- Attend the mandatory orientation session.
- Take and pass all written, oral, and physical exams as well as background, psychological, polygraph, and medical exams, including a drug and alcohol screening.

Application packets may be obtained online here: http://www.bridgeview-il.gov/ or from the Clerk's Office during regular business hours at:

Clerk's Office Village of Bridgeview 7500 S. Oketo Ave. Bridgeview, IL 60455

Completed applications with all required documentation and the payment of a \$35.00 non-refundable processing fee must be received by the Clerk's Office on or before:

April 26, 2013 at 5:00 p.m.

Late and/or incomplete applications will be not be considered or processed.

Shortly after the application deadline, all eligible applicants will receive a testing schedule and an invitation to attend the mandatory orientation session.

THE VILLAGE OF BRIDGEVIEW IS AN EQUAL OPPORTUNITY EMPLOYER

Application for Employment

It is the policy of the company to provide equal opportunity with regard to all terms and conditions of employment. The company complies with federal and state laws prohibiting discrimination on the basis of race, color, religion, creed, national origin, disability, veteran status, age or any other protected characteristic.

Name		Applicant #
	EL EL HIMME AND	Employee #
		Hire date
City/State/7ID		Position Rate
Position applied for		Glass
Special training or skills: (languages, are applying:	Skill Other Notes	
Would you accept full-time work? Yes On what date would you be available f	No Would you accept part-time work? Yes No	
Have you ever been employed here be	fore? No Yes Dates	Attachments
	red in the U.S.? Yes [(If yes, proof is required.) No [Résumé Applicant Reference Check Applicant Interview
Educational Background		Payroll Change Notice Employee DataCard
Grammar School:		
Name and location		
Course of study		
High School:		
Name and location		atelli. Si
Course of study	Did you graduate? Yes No Degree or diploma	
College:		erakonanganya andulu di Managanya angan ing selatina
Name and location		
Course of study	Did you graduate? Yes No Degree or diploma	
Graduate School:		
Name and location		
Course of study	Did you graduate? Yes No Degree or diploma	THE RELATED TO SELECT THE SECOND SECO
Vocational, or other, training		
Name and location		at the second
		THE REAL PROPERTY OF THE PROPE
Course of study	Did you graduate? Yes No Degree or diploma	The second secon

Previous Employers and Addresses

. Company Name	Phone ()	
Contact Name			
Address	Employed From MONTH / YEAR	To _	
Position			
Company Name	Phone ()	
Contact Name			-701
Address	Employed From MONTH / YEAR	To _	
Position	Reason for Leaving		
Company Name	Phone ()	
Contact Name	This is a call with the town times	e dimit	nel nagatile
Address	Employed From MONTH / YEAR	To	MONTH VEAD
Position			
Company Name	Phone ()	11
Contact Name			
Address		To	MONTH / YEAR
Position			
ERTIFY THAT ALL THE INFORMATION SUBMITTED INFORMATION, OMISSIONS, OR MISREPRESENTATION PLOYMENT MAY BE TERMINATED AT ANY TIME. CONSIDERATION OF MY EMPLOYMENT, I AGREE TO DECOMPENSATION CAN BE TERMINATED, WITH OR MPANY'S OPTION. I ALSO UNDERSTAND AND AGR	BY ME ON THIS APPLICATION IS TRUE AND COMPLETE, AND I UND IS ARE DISCOVERED, MY APPLICATION MAY BE REJECTED, AND IF I CONFORM TO THE COMPANY'S RULES AND REGULATIONS, AND I WITHOUT CAUSE, AND WITH OR WITHOUT NOTICE, AT ANY TIME, EE THAT THE TERMS AND CONDITIONS OF MY EMPLOYMENT MAY E	ERSTAND THA AM EMPLOYE AGREE THAT A AT EITHER MY BE CHANGED, V	T IF AI D, MY MY EMI OR TH
PRESIDENT, AND THEN ONLY WHEN IN WRITING	T ANY TIME BY THE COMPANY. I UNDERSTAND THAT NO COMPANY AND SIGNED BY THE PRESIDENT, HAS ANY AUTHORITY TO ENTER R TO MAKE ANY AGREEMENT CONTRARY TO THE FOREGOING.	NTO ANY AGR	REEMENT FO

This Application for Employment has been proposed for general use throughout the United States. Neither HRdirect nor its counsel or advisors assume any responsibility for the inclusion in the Application for Employment of any questions which may violate local, State, or Federal lows. Users should consult their own legal counsel about any questions they may have concerning this form or its use.

AUTHORIZATION TO RELEASE INFORMATION AND WAIVER

I,	, authorize and empower the Village of Bridgeview
Personnel Board	and/or the Village of Bridgeview (collectively, the "Village"), any consumer reporting
agency, or other o	outside service company engaged by the Village for this purpose, now or subsequently,
to obtain, prepare	, use and furnish information, whether written or oral, concerning my current and former
employment, edu	cation, creditworthiness, credit standing, credit capacity, character, general reputation,
personal characte	ristics and mode of living through correspondence or personal interviews with
neighbors, friends	s, associates, or others with whom I am acquainted or who may have knowledge
concerning any o	f the above items.

I hereby authorize any representative of the Village bearing this release to obtain any information in your files pertaining to my employment records and direct you to release such information upon request of the bearer. I also authorize a review of and full disclosure of all records, or any part thereof, concerning myself, by and to any duly authorized agent of the Village, whether said records are of public, private, or confidential nature. The intent of this release is to give my consent for full and complete disclosure.

This release is not to include any medically related history or Workers' Compensation Act or Workers' Occupational Diseases Act claims.

Note to employers: Section 10 of the Illinois Employment Record Disclosure Act, 745 ILCS 46/10, entitled "No liability for providing truthful information," states:

"Any employer or authorized employee or agent acting on behalf of an employer who, upon inquiry by a prospective employer, provides truthful written or verbal information, or information that it believes in good faith is truthful, about a current or former employee's job performance is presumed to be acting in good faith and is immune from civil liability for the disclosure and the consequences of the disclosure. The presumption of good faith established in this Section may be rebutted by a preponderance of evidence that the information disclosed was knowingly false or in violation of a civil right of the employee or former employee."

I reiterate and emphasize that the specific intent of this release is to provide full and free access to the background and history of my personal life for the specific purpose of pursuing a background investigation that may provide pertinent data for the Village to consider in determining my suitability for employment.

I consent to the release of any and all of the following public and private information that you may have concerning me:

- Employment and pre-employment information, including, but not limited to, background reports and
 efficiency/performance ratings, attendance records, but excluding information relating to medical
 conditions and medical history.
- Any internal affairs investigations and disciplinary actions, including any files deemed to be confidential and/or sealed complaints or grievances filed by or against me.
- The records or recollections of attorneys at law, or other counsel, whether representing me or any other person in any case, either criminal or civil, in which I presently have, or have had an interest, excluding any medical malpractice or workers' compensation claims.
- Personal background and reputation.
- Military service records.

- Educational records.
- Financial and/or credit records including loans, commercial or retail credit agencies (including credit reports and/or ratings).
- Any and all records maintained by any criminal justice or corrections agency including incident reports, arrest records, traffic citations and criminal history information.
- Any information contained in investigatory files.

I hereby release you, as the custodian of such records, your organization, including its officers, employees, or related personnel, both individually and collectively, from any and all liability for damages of any kind, which may at any time result to me, my heirs, family, or associates because of compliance with this authorization to release information or any attempt to comply with it. I direct you to release such information upon request of the duly authorized representative of the Village regardless of any agreement I may have previously made to the contrary.

For and in consideration of the Village's acceptance and processing of my employment application, I agree to hold the Village, its agents and employees harmless from any and all claims and liability associated with my employment application and any and all associated tests, interviews, examinations, and any other claims and liability in any way connected with the decision whether or not to employ me, including any liability or damage pursuant to any state or federal laws.

I understand that should information of a serious criminal nature surface as the result of this investigation, such information may be turned over to the proper authorities. I understand my rights under Title 5, United States Code, Section 552a, the Privacy Act of 1974, with regard to access to and disclosure of records and I waive those rights with the understanding that information furnished will be used by the Village in conjunction with employment procedures.

I also understand that by signing this release, I specifically waive any written notice to me of the disclosure of any disciplinary report, letter of reprimand, or other disciplinary action as required by the Illinois Personnel Record Review Act , 820 ILCS 40/7.

A photocopy/facsimile copy of this release will be valid as an original thereof, even though said photocopy/facsimile does not contain an original writing of my signature. Should there be any questions as to the validity of this release, you may contact me at the address listed below.

I further understand that I waive any right or opportunity to read or review any and all information provided in the background investigation report prepared by or at the request of the Village or its attachments and that all information and documents provided to the Village become the property of the Village and will not be returned to me.

I agree to indemnify and hold harmless the person(s) to whom this request is presented and his or her agents and employees, from and against all claims, damages, losses and expenses, including reasonable attorney's fees arising out of or by reason of complying, or attempting to comply with this request.

Signature:	Date:	
Name (First, Middle, Last):		
Address:		
Phone:		_
Driver's License No.	Social Security No	
Witnessed by:	Date:	

By signing below, I certify that I have had adequate time to review this entire form and have read and

clearly understand its purpose.

ATTACHMENT

STATEMENT OF PURPOSE FOR COLLECTION OF SOCIAL SECURITY NUMBERS BY THE VILLAGE OF BRIDGEVIEW

The Identity Protection Act, 5 ILCS 179/1, et seq., and the Identity-Protection Policy of the Village of Bridgeview ("Village") require the Village to provide an individual with a statement of the purpose or purposes for which the Village is collecting and using the individual's Social Security number ("SSN") anytime an individual is asked to provide the Village with his or her SSN or if an individual requests it. This Statement of Purpose is being provided to you because you have been asked by the Village to provide your SSN or because you requested a copy of this statement.

Why do we collect your Social Security number?

You are being asked for your SSN for one or more of the following reasons:

To obtain information on your current and former employment and for background reports.

What do we do with your Social Security number?

We will only use your SSN for the purpose for which it was collected.

We will not:

- Sell, lease, loan, trade, or rent your SSN to a third party for any purpose;
- Publicly post or publicly display your SSN;
- Print your SSN on any card required for you to access our services;
- Require you to transmit your SSN over the Internet, unless the connection is secure or your SSN is encrypted; or
- Print your SSN on any materials that are mailed to you, unless State or Federal
 law requires that number to be on documents mailed to you. If mailed, your SSN
 will not be visible without opening the envelope in which it is contained.

Questions or Complaints about this Statement of Purpose

Write to:

Village of Bridgeview

Attn: John C. Altar, Village Clerk

7500 South Oketo Avenue Bridgeview, IL 60455